PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fec(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Lanette Burton

lanuar

JAN 2 5 2005

(703) 746-4000

INSTRUCTION This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate to the current correspondence address as appropriate to the current correspondence address as appropriate to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for the current correspondence of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for the current fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate commot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

CURRENT CORRESPONDENCE ADDRESS (Note: Uso Block I for any change of outdress)

23556

7590

12/17/2004

KIMBERLY-CLARK WORLDWIDE, INC. **401 NORTH LAKE STREET NEENAH, WI 54956**

01/26/2005 MGEBREM2 00000014 110875 10803405

01 FC:1501 02 FC:1504 03 FC:8001 1400.00 DA

300.00 DA

10/803 405

APPLICATION NO.

FILING DATE

03/17/2004

FIRST NAMED INVENTOR

Michael Alan Hermans

ATTORNEY DOCKET NO. 14,325.2

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittant is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

2005

CONFIRMATION NO.

(Signature

(Date

5564

TITLE OF INVENTION: MODIFIED CONVENTIONAL WET PRESSED TISSUE MACHINE

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	03/17/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
FORTUNA, JOSE A		1731		162-301000		
		- Addment (37	2 For no	nting on the patent front page, I	ist	
Change of correspondence address or indication of "Fee Address" (37 FR 1.363).			(1) the names of up to 3 registered patent attorneys			
Change of correspondence address (or Change of Address form PTO/SB/122) attached.		(2) the na		ame of a single firm (having as a member a		
☐ "Fee Address" indication (or "Fee Address"		e di a Custonici	cepistered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.			
ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)	in identified below the sh	neument has been filed f
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified to a 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will ap Fa substituti	pear on the patent. It an assignment.	mee is identified below, the b	comment that been race i
(A) NAME OF ASSIGN		(B) RESIDEN	CE: (CITY and STATE OR CO	DUNTRY)	
Kimberly-Cla	rk Worldwide, Inc.	•	Neer	nah, Wisconsin		
lease check the appropriat	e assignee category or catego	ries (will not be pr	inted on the	patent): 🚨 Individual 🛣 (Corporation or other private gro	oup entity Governme
. The following fee(s) are enclosed:		46	4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.			
I Issue Fee Di Publication Fee (No small entity discount permitt			A cocci	at by credit card. Form PTO-203	18 is attached.	
			W) The Di	n by credit cato. Forth Fro do.	charge the required facts), or	credit any overpayment,
Advance Order - # of Copies			Deposit Ac	rector is hereby authorized by count Number 11-0875	(enclose an extra c	opy of this form).
	(from status indicated above SMALL ENTITY status. See	17 CCD 1 77	🗖 ъ. Аррі	icant is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
the Director of the USPTC	is requested to apply the Isa Publication Fee (if required) ords of the United States Par	ue Fee and Publica	tion Fee (if a I from anyo Office.	any) or to re-apply any previous ne other than the applicant, a re		
Authorized Signature	GARRE A. P.	cum		Dute	1-25-200	5
Typed or printed name Scott A. Baum			Registration No. 51,237			
his form and/or suggestion Box 1450, Alexandria, Vir	is for reducing this burden, s ginia 22313-1450. DO NOT	hould be sent to the SEND FEES OR	c Chief Info	d to obtain or retain a benefit by ollection is estimated to take I upon the individual case. Any mation Officer, U.S. Putent an ID FORMS TO THIS ADDRESS ollection of information unless in the control of the control	SS. SEND TO: Commissioner	for Patents, P.O. Box 145
				allaction of information unless i	T DISDIAVE D VILLU UMID CONTO	quiioci.

PTOL-85 (Rev. 11/04) Approved for use through 04/30/2007.